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☑ Declaration

Submitted

with Initial

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

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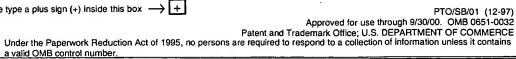
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ANT-005

David M. Heffelfinger

COMPLETE IF KNOWN



Attorney Docket Number

First Named Inventor

Application Number

Filing Date

Group Art Unit



Filing	(37 CFR 1.16 (e)) required)	Examiner	Name							
As a below named inventor, I hereby declare that:										
My residence, post office a	My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
IDENTIFYING INDICIA AND FOCUSING TARGET										
the specification of which (Title of the Invention) is attached hereto OR										
was filed on (MM/Di	D/YYYY)	· ·	as United State	es Applica	tion Number or P	CT International				
Application Number	and v	was amended on (Mi	M/DD/YYYY)			(if applicable).				
I hereby state that I have re			ve identified s	pecificatio	n, including the c	laims, as				
amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing (MM/DD/YY)		iority Claimed	Certifled Co YES	py Attached? NO				
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Additional foreign applica	ition numbers are listed on	a supplemental prior	rity data sheet	PTO/SB/0)2B attached here	eto:				
	inder 35 U.S.C. 119(e) of a			ation(s) lis	sted below.					
Application Number	(s) Filing Da	ᆜ _								
60/442,332	01/23/2	2003		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
[Page 1 of 2] Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.										

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)					nt Patent N		
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	Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										arata	
As a named inventor.	I hereby appoint th	e followi	na registered pr	actitioner(s								
and Trademark Office	connected therewi	th: 🗶	Customer Num OR	ber	00	003897 Place Customer Number Bar Code Label here					omer Code	
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Additional register	red practitioner(s)	named o	n supplemental	Registered	Prac	itioner	Information sh	eet PTO	/SB/020	attached here	eto.	
Direct all correspondence to: Customer Number or Bar Code Label Onumber Onumb								ress below				
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor:												
Given Name (first and middle [if any])					Family Name or Surname							
David M.					Heffelfinger							
Inventor's Signature	Sau	ud	N. 9	alfiber Date 1/21/04								
Residence: City	Sequim	Sequim State WA				Country U.S.A. Citizenship U.S						
Post Office Addres	6986 Palo	6986 Palo Alto Road										
Post Office Addres	s		<u>. </u>									
City	Sequim	State	WA	ZIP	9	3382		Cou	ntry	U.S.A.		
Additional inver	ntors are being n	amed o	n the _1_su	pplementa	al Ado	litional	Inventor(s)	sheet(s	PTO/	SB/02A attac	hed hereto	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Sumame							
Gregory J.					Fisher							
Inventor's Signature	Gregory 8	A	ب.	her	~					e	1/21/04	
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Post Office Address	24823 Second Street											
Post Office Address												
City	Hayward	s	tate	CA		ZIP	94541	Count	_{ry} U.:	U.S.A.		
Name of Addition	Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								ventor			
Given Nar	me (first and middle (if any	/])			Family Name or Sumame							
Charles Stewart					Smith III							
Inventor's Signature	Charle Sur					AP					1/21/04	
Residence: City	Sacramento	CA	Country U.S.A.				Citiz	Citizenship U.S.A.				
Post Office Address	3450 J Street											
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City	Sacramento State CA			CA		ZiP	95816	Cou	ntry	U.S.A	١.	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given Name (first and middle [if any])					Family Name or Surname							
David M.					Schneck							
Inventor's Signature	D./M.	_	S	4	2	<u> </u>				ate	1/22/04	
Residence: City	San Jose	St	tate	CA	Country U.S.A.			Citizenship U.S		U.S.A.		
Post Office Address	484 Arleta Avenue											
Post Office Address												
City	San Jose State CA			CA		ZIP	95128	(Country	U.S	5.A.	

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